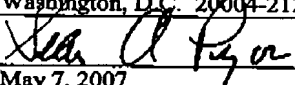
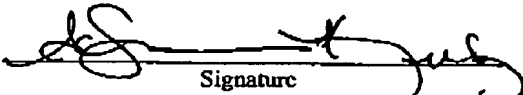


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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/731,089
		Filing Date	December 10, 2003
		First Named Inventor	Shinya SASAGAWA et al.
		Group Art Unit	1765
		Examiner Name	Maki A. Angadi
Total Number of Pages in This Submission	4	Attorney Docket Number	740756-2676

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> Request for Reconsideration <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Sean A. Pryor, Reg. No. - 48,103 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
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Date	May 7, 2007

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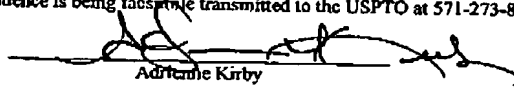
NO. 0369—P. 2—

Docket No. 740756-2676

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)	
Shinya SASAGAWA et al.)	Group Art Unit: 1765
Application No. 10/731,089)	Examiner: Maki A. Angadi
Filed: December 10, 2003)	Confirmation No. 6646
For: METHOD OF MANUFACTURING A SEMICONDUCTOR DEVICE)	Date: May 7, 2007

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Sir:

In response to the Office Action mailed February 5, 2007, please consider Applicants remarks in connection with the above identified application as follows:

10560451.1